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U S Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U	2 Fiscal Year Covered From				
13495	1 / 1 / 2004 Through 12 / 31 / 2004				
3 Name and address of person filing	4 Name file number and address of labor organization				
Name Daniel J Kane	Name Int 1 Brotherhood of Electrical Workers LU 428				
	Labor Organization File Number 034 225				
PO Box Bldg Room No If any	P O Box Building and Room Number if any				
Street 911 20th Street	Street 911 20th Street				
City Bakersfield	City Bakersfield				
State California ZIP Code + 4 93301	State California ZIP Code + 4 93301				
5 Position in labor organization Bus Mgr/Fin Sec and Trustee					
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions) A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent					
6 Name and address of Employer (including trade name if any)	ame and address of Employer (including trade name if any) 7 a Nature of Interest Transaction or Income				
Name					
Trade Name If any					
PO Box Bldg Room No If any	7 b Amount				
Street	, a randalit				
City					
State ZtP Code + 4					
Signature					
16 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned s knowledge and belief true correct and complete (See the section on penalties in the instructions.)					
Signed Danel Hane	On 08/15/2005 661-323 2979 Date Telephone Number				

File Number U Name of Person Filing Daniel Kane B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested 8 Name and address of Business (including trade name if any) 9 Business deals with Name Sierra Investment Partners a Labor Organization Trade Name If any b Trust PO Box Bldg Room No if any Suite 300 c Employer Street 101 Ygnacio Valley Road Walnut Creek City State California ZIP Code + 4 94596 4061 11 a Nature of such dealing 10 If 9 b or 9 c is checked give trust or employer's name Trustee Name Kern Co Electrical Health Training Trusts Trade Name if any PO Box Bldg Room No Ifany Suite 100 Street 3008 Sillect Avenue 11 b Approximate dollar value of such dealing City Bakersfield 12 a Nature of interest held or income received Complimentary Gifts (approximate value) ZIP Code + 4 93308 State California Bottle of Wine (\$35) Xmas 2004 Corkscrew w/Presentation Box (\$50) Xmas 2004 12 b Amount C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value 14 a Nature of payment 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Christmas Gift Smoked Salmon (\$54) Xmas 2004 Name Adams Broadwell Joseph & Cardozo Trade Name if any PO Box Bldg Room No if any Suite 1000 Street 601 Gateway Boulevard City South San Francisco State California ZIP Code + 4 94080-7037

14 b Amount of payment.

13 b Is the Business an Employer

or Consultant

\$54

		I
Name of Person Filing Daniel	Kane	File Number U

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Construction Benefits Administration Inc Trade Name If any P O Box Bldg Room No If any Suite 300	a Labor Organization b Trust	
Street 3008 Sillect Avenue City Bakersfield	c Employer	
State California ZIP Code + 4 93308		
10 if 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name Kern Co Electrical Health Training Trust	Trustee	4
Trade Name If any		di mayon di manana di
PO Box Bldg Room No If any Suite 100		
Street 3008 Sillect Avenue		
City Bakersfield		
State California ZIP Code + 4 93308	11 b Approximate dollar value of such dealing	
	12 a Nature of interest held or income received	
	Reimbursement for expenses 1 Employee Benefits Conference No December 2004 \$1550 00	ew Orleans
		r
	12 b Amount	\$1 550